

(REFERENCE COPY - Not for submission)

#### Commercial Broadcast Stations Non-Biennial Ownership Report (FCC Form 323)

File Number: 0000112264 | Submit Date: 2020-04-15 | FRN: 0019802628

Purpose: Commercial Broadcast Stations Non-Biennial Ownership Report Status: Received Status Date:

04/15/2020 Filing Status: Active

#### **Section I - General Information**

#### 1. Respondent

FRN	Entity Name
0019802628	New Covenant Ministries, Inc.

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
3949 Atlantic Boulevard	Jacksonville	FL	32207	+1 (904) 301- 9565	drjeanna@ncmjax. org

# 2. Contact Representative

Name	Organization
Cary S. Tepper	Tepper Law Firm, LLC

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
4900 Auburn Avenue Suite 100	Bethesda	MD	20814-2632	+1 (301) 718-1818	tepperlaw@aol.com

### 3. Application Filing Fee

Not Applicable

# 4. Nature of Respondent

(a) Provide the following information about the Respondent:		
Relationship to stations/permits	Licensee	
Nature of Respondent	Not-for-profit corporation	

(b) Provide the following information about this report:				
Purpose Transfer of control or assignment of license/permi				
"As of" date	04/15/2020			
	When filing a biennial ownership report or validating and resubmitting a prior biennial ownership report, this date must be Oct. 1 of the year in which this report is filed.			

### 5. Licensee(s) /Permittees(s)

## and Station(s) /Permit(s)

Licensee/Permittee Name	FRN	
New Covenant Ministries, Inc.	0019802628	

Fac. ID No.	Call Sign	City	State	Service
29736	WJNJ	JACKSONVILLE	FL	AM
76224	W279AG	ATLANTIC BEACH	FL	FX

#### **Section II – Non-Biennial Ownership Information**

1. 47 C.F.R. Section 73.3613 and Other Documents Licensee/Permittee Respondents should list all contracts and other instruments set forth in 47 C.F.R. Section 73.3613(a) through (c) for the facility or facilities listed on this report. In addition, attributable Local Marketing Agreements (LMAs) and attributable Joint Sales Agreements (JSAs) must be disclosed by the licensee of the brokering station on its ownership report. If the agreement is an attributable LMA, an attributable JSA, or a network affiliation agreement, check the appropriate box. Otherwise, select "Other." Non-Licensee/Permittee Respondents should select "Not Applicable" in response to this question.

Document Information				
Description of contract or instrument	Articles of Incorporation			
Parties to contract or instrument	State of Florida			
Date of execution	03/1975			
Date of expiration	No expiration date			
Agreement type (check all that apply)	Other  Agreement Type: Corporation formation document.			

#### 2. Ownership Interests

(a) Ownership Interests. This Question requires Respondents to enter detailed information about ownership interests by generating a series of subforms. Answer each question on each subform. The first subform listing should be for the Respondent itself. If the Respondent is not a natural person, also list each of the officers, directors, stockholders, non-insulated partners, non-insulated members, and any other persons or entities with a direct attributable interest in the Respondent pursuant to the standards set forth in 47 C.F.R. Section 73.3555. (A "direct" interest is one that is not held through any intervening companies or entities.) List each interest holder with a direct attributable interest in the Respondent separately.

Leave the percentage of total assets (Equity Debt Plus) field blank for an interest holder unless that interest holder has an attributable interest in the Respondent solely on the basis of the Commission's Equity Debt Plus attribution standard, 47 C.F.R. Section 73.3555, Note 2(i).

In the case of vertical or indirect ownership structures, list only those interests in the Respondent that also represent an attributable interest in the Licensee(s) or Permittee(s) for which the report is being submitted.

Entities that are part of an organizational structure that includes holding companies or other forms of indirect ownership must file separate ownership reports. In such a structure do not report, or file a separate report for, any interest holder that does not have an attributable interest in the Licensee(s) or Permittee(s) for which the report is being submitted.

Please see the Instructions for further detail concerning interests that must be reported in response to this question.

The Respondent must provide an FCC Registration Number for each interest holder reported in response to this question. Please see the Instructions for detailed information and guidance concerning this requirement.

Ownership Information			
FRN	0019802628		
Entity Name	New Covenant Ministries, Inc.		
Address	РО Вох		
	Street 1	3949 Atlantic Boulevard	
	Street 2		

	City	Jacksonville		
	State ("NA" if non-U.S. address)	FL		
Zip/Postal Code 32207				
	Country (if non-U.S. United States address)			
Listing Type	Respondent			
Positional Interests (check all that apply)	Respondent	Respondent		
nterest Percentages enter percentage values rom 0.0 to 100.0)	Voting	0.0%	Jointly Held? No	
	Total assets (Equity Debt Plus)	0.0%	•	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?			No	

Ownership Information				
FRN	0020022810	0020022810		
Name	Jeana Tomlinson	Jeana Tomlinson		
Address PO Box				
	Street 1	3097 Marshwinds Way		
	Street 2			
	City	Jacksonville		
	State ("NA" if non-U.S. address)	FL		
Zip/Postal Code 32226		32226	226	
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Officer, Director, Other - Trus	tee		
Interest Percentages (enter percentage values	Voting	50.0%	Jointly Held? No	
from 0.0 to 100.0)	Total assets (Equity Debt Plus)	50.0%		
Does interest holder have an attributable interest in one or more broadcast stations hat do not appear on this report?				

Ownership Information		
FRN	0020022778	
Name	Wiley Tomlinson	
Address	РО Вох	
	Street 1	3097 Marshwinds Way

	Street 2		
	City	Jacksonville	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	32226	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Director, Other - Trustee		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	50.0%	Jointly Held? No
	Total assets (Equity Debt Plus)	50.0%	
Does interest holder have that do not appear on this	an attributable interest in one creport?	or more broadcast stations	No
• • •	at any interests, including equi	ity, financial, or voting	Yes

(c) Does the Respondent or any reported interest holder hold an attributable interest in any newspaper entities in the same market as any station for which this report is filed, as defined in 47 C.F.R. Section 73.3555?

If "Yes," provide information describing the interest(s), using EITHER the subform OR the spreadsheet option below. Respondents with a large number (50 or more) of entries to submit should use the spreadsheet option.

NOTE: Spreadsheets must be submitted in a special XML Spreadsheet format with the appropriate structure that is specified in the documentation. For instructions on how to use the spreadsheet option to complete this question (including templates to start with), please Click Here.

If using the subform, leave the percentage of total assets (Equity Debt Plus) field blank for an interest holder unless that interest holder has an attributable interest in the newspaper entity solely on the basis of the Commission's Equity Debt Plus attribution standard, 47 C.F.R. Section 73.3555, Note 2(i). If using an XML Spreadsheet, enter "NA" into the percentage of total assets (Equity Debt Plus) field for an interest holder unless that interest holder has an attributable interest in the newspaper entity solely on the basis of the Commission's Equity Debt Plus attribution standard.

The Respondent must provide an FCC Registration Number for each interest holder reported in response to this question. Please see the Instructions for detailed information and guidance concerning this requirement.

No

(d) Are any of the individuals listed as an attributable interest holder in the Respondent married to each other or related to each other as parentchild or as siblings?

Yes

If "Yes," provide the following information for each such the relationship.

Family Relationships					
FRN	0020022778	Name	Wiley Tomlinson		
FRN	0020022810	Name	Jeana Tomlinson		
Relationship	Spouses				

(e) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?

If "Yes," complete the information in the required fields and submit an Exhibit fully describing

that individual's duties and responsibilities, and explaining why that individual should not be

attributed an interest.

#### Certification

Section	Question	Response
Authorized Party to Sign	WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND /OR REVOCATION OF ANY STATION LICENSEOR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).	
Certification	I certify that I have examined this report and that to the best of my knowledge and belief, all statements in this report are true, correct and complete.	Official Title: <b>President</b> Exact Legal Title or Name of Respondent: <b>New Covenant Ministries, Inc.</b> Name: <b>Wiley Tomlinson</b> Phone: <b>9046417600</b> 04/15/2020